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ENDMENT TRANSMITTAL LETTER ER NO. CLIENT-MA' 66654-595 SERIAL NO: FILING DATE: EXAMINER: GROUP ART UNIT: 09/757,041 1642 January 9, 2001 S. Ungar CONFIRMATION NO.: 6395 INVENTION: CD40 ASSOCIATED PROTEINS

COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, VA 22313-1450

CERTIFICATE OF MAILING BY "EXPRESS MAIL"

"EXPRESS MAIL" MAILING LABEL NUMBER: EV 347 546 242 US

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I HEREBY CERTIFY THAT THIS PAPER OR FEE IS BEING DEPOSITED WITH THE UNITED STATES POSTAL SERVICE "EXPRESS MAIL POST OFFICE TO ADDRESSEE" SERVICE UNDER 37 C.F.R. 110 ON THE DATE INDICATED ABOVE, AND IS ADDRESSED TO: COMMISSIONER FOR PATENTS, P.O. BOX 1450, ALEXANDRIA, VA 22313-1450.

(TYPED OR PRINTED NAME OR PERSON MAILING PAPER OR FEE)

(SIGNATURE OF PERSON MAILING PAPER OR FEE)

BEST AVAILABLE COPY

Transmitted herewith is a response, with attached Exhibits 1 and 2, to the Office Action mailed June 2, 2003, in the above-identified application.

	Small Entity olished under			application	has been
	One executed	Termina	l Discla	imer.	
<u> x</u>	Petition for (in duplicate		-month e	extension of	time

An additional claims fee is required and has been calculated as shown below:

No additional claims fee is required.

CLAIMS AS AMENDED

	NUMBER	Г	HIGHEST		NUMBER OF	Г	RATE		FEE		
	AFTER AMEND- MENT		NUMBER PREVIOUSLY PAID FOR		EXTRA CLAIMS PRESENTED		SMALL ENTITY	OTHER ENTITY		SMALL ENTITY	OTHER ENTITY
TOTAL CLAIMS	17	-	22	-	0	×	\$9	\$18	_	\$	\$
INDEPEN- DENT				<u> </u>							
CLAIMS	5	-	2	-	3	×	\$42	\$84	=	\$126	\$
FIRST PRE OF MULTIP DEPENDENT	LE	_	YES		XNO		\$140	\$280	=	\$	ş
						TOTAL AD	DITIONAL		\$126	\$	

- * If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 20, write "20" in this space.
- ** If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 3, write "3" in this space.
- *** If the difference between the "NUMBER AFTER AMENDMENT" and the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 0, write "0" in the space.

Inventors: Reed and Sato Serial No.: 09/757,041 Filed: January 9, 2001

Page 2

- X Please charge my Deposit Account No. 502624 the amount of \$601.00, \$475.00 of which covers the fee for a three-month extension of time and \$126.00 of which covers the additional claims fee. A duplicate copy of this sheet is enclosed.
- X The Commissioner is hereby authorized to charge payment of any fees associated with this communication or credit any overpayment to Deposit Account No. 502624. A duplicate copy of this sheet is enclosed.
- \underline{X} The Commissioner is hereby authorized to charge to Deposit Account No. 502624 any fees under 37 CFR 1.17 which may be required under 37 CFR 1.136(a)(3) for an extension of time in any concurrent or future reply requiring a petition for extension of time. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

December 1, 2003

Date

McDERMOTT, WILL & EMERY 4370 La Jolla Village Drive, 7th Floor San Diego, California 92122

Damela Pamela M. Guy

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PATENT

Client-Matter No.: 66654-595 (P-LJ 4494)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of Reed and Sato

Serial No: 09/757,041

Filed: January 9, 2001

For: CD40 ASSOCIATED PROTEINS)

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Confirmation No.: 6395

Group Art Unit: 1642

Examiner: S. Ungar

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Printed Name of Person Mailing Paper or Fee

Signature of Person Mailing Paper or Fee

RESPONSE TO OFFICE ACTION

Responsive to the Office Action mailed June 2, 2003, entry of the following amendments and remarks is respectfully requested.

<u>AMENDMENTS</u>

Amendments to the claims are reflected in the listing of claims that begins on page 2 of this paper. Currently amended claims are presented with markings to indicate changes made relative to the immediate prior version by underlining of added text and strikethrough of deleted text.